

**FEC  
FORM 1****STATEMENT OF  
ORGANIZATION**

(See instructions)

Office use only

1. NAME OF COMMITTEE (in full) ☐ (Check if name is changed) Example: If typing, type over the lines

12FE4M5

Committee To Reelect Congressman Chris Smith

ADDRESS (number and street)

P.O. Box 3184



(Check if address is changed)

Hamilton

NJ

08619

CITY ▲

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

smith4nj@optonline.net

COMMITTEE'S WEB PAGE ADDRESS (URL)

COMMITTEE'S FAX NUMBER

609-448-2860

2. DATE 

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	1		2	0	0	8

3. FEC IDENTIFICATION NUMBER

C C00096412

4. IS THIS STATEMENT ☒ NEW (N) OR ☐ AMENDED (A)

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete

Type or Print Name of Treasurer Constance CareySignature of Treasurer Electronically Filed by Constance Carey

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	1		2	0	0	8

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. § 437g.

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS

Office  
Use  
OnlyFor further information contact:  
Federal Election Commission  
Toll Free 800-424-9530  
Local 202-694-1100**FEC FORM 1**  
(Revised 02/2003)